

FILED

AUG 11 2008

MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to: *USDC*
ILSD, Benton Division
301 West Main Street
Benton, IL 62812

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Michael W. Dobbins☐ Agent☐ Addressee

B. Received by (Printed Name)

G. Love

C. Date of Delivery

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D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article
 (Transit)

7002 0510 0000 6469 3483

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

08 c 50138